

preventing the edema of the arm that is so common.

If the axillary veins are torn he maintains that they should always be ligated, never sutured; that there is little danger of hemorrhage on account of negative pressure that exists in the veins. He advocates that the subscapular nerve should not be disturbed, otherwise the woman will not be able to hook her belt from behind; this is a point that is one of the many important points that can be found in this book that are not presented elsewhere.

The final results in carcinoma, he states, have not very materially improved in the last quarter of a century; he maintains that where there is no lymphatic metastasis demonstrable at the time of the operation that the patients remain well exactly as they did in former years, but where metastases are demonstrable the results are as bad as they were in former years.

The subject as presented in this one clinic is so rich in valuable information, however, that it is not possible to give a proper review of the same without analyzing each paragraph.

The next case is a lipoma of the shoulder; here he discusses where the incision should be made, the origin of the tumor and the possibility of recurrence. He states that it is important to remove the basal portion, otherwise the tumor will recur.

In lipoma of the spinal column he emphasizes the fact that the periosteum must be removed, otherwise there will be a recurrence of the growth.

The next case presented is a case of varicocele and the comment upon this condition is very instructive. Murphy attaches considerable importance to the backache that occurs; he also goes into the differential diagnosis of backache at length, enumerating both the positional and traumatic spondylitis peculiar to coal miners and farmers, metastasis, malignant growths, etc.

The next case is one of nerve anastomosis; here the comments are so important and so well brought out that it is hardly possible to give an accurate idea of the valuable information contained in this one article; he takes up the anatomy and physiology of nerves in a very satisfactory manner, and he reports a case of nerve plastic which is well shown by two excellent illustrations.

He takes up the question of the regeneration of nerves and he states that time cuts little figure in the factor of restoration of function; that long intervals may elapse between the time of the division of the nerve and the time of its union if favorable conditions exist for regeneration. During the period that the nerves are out of commission there is an atrophy of the muscle cells, but there is never complete degeneration of the muscle cells beyond the potency of the nerve cells. He believes that the muscle plates diminish greatly in size but as soon as they are spliced again with living nerves they regain their tone and strength.

The reason that there has been such disparity in results in connection with the suture of nerves is that the axonal ends are not properly exposed; if they are properly exposed in all cases success, according to Murphy, would result.

The next case is one for the injection of salvarsan. Murphy's remarks are very striking in connection with the intravenous use of this drug. He states that no surgeon injects anything into a vein without serious consideration; he also remarks that the inside of a vein is a place that the surgeon greatly respects and that the physicians who are not familiar with the surgical art and the pathology of the veins resort to intravenous injection much more readily than does the surgeon.

He also takes up the subject of anaphylaxis with its sequelae of sudden death shortly after the administration of salvarsan or serum. Murphy uses salvarsan intramuscularly but does not use it intravenously.

The next subject is cystadenoma of the breast.

Then there is a case of pelvic tumor presented with illustrations.

On the subject of nerve anastomosis involving the muscular spiral nerve it is extraordinary how much information the author has condensed into this lecture. It appears to the reviewer that there is more information concerning the regeneration of nerves to be found in this article than can be found elsewhere.

There is a case of duodenal ulcer also presented. The pathological side as well as the surgical side of this subject is very well presented.

In conclusion the reviewer believes the book to be a most valuable addition to the literature on surgery.

C. G. LEVISON.

### ANOTHER LIQUID SULPHUR FAKE.

A report of the analysis of a proprietary nostrum, Sulphume, by the A. M. A. Chemical Laboratory (Jour. A. M. A., Dec. 2, 1911, p. 1853) begins thus: "Many medicinal fakes apparently lead a charmed life. They may be exposed, ridiculed and seemingly annihilated, but in due time they are bound to renew their existence. As a type of such fakes we may take any of the various aliases under which the venerable Vlemincx' solution, after falling into disuse, has been again and again revived and rechristened." Vlemincx' solution which even has forced its way into the pharmacists' formula book, the National Formulary, is made by boiling ordinary sulphur and lime with water and thus obtaining a solution of calcium sulphide. The solution has a rich golden yellow color and a rotten egg odor and because of its odor and of its color appears to appeal to the laity.

Now this preparation with its charmed life has come west and under a new name and by means of new stories is attempting to make a place for itself in the homes of western people. The new name is Sulphurro given to it by its new parents the "C. M. C. Stewart Sulphur Company, Inc., Seattle, Wash.," who recommend its use in rheumatism, asthma, goiter, eczema, dyspepsia and all diseases of the stomach, kidneys, skin and blood and modestly suggest that it may also be used as a rectal enema, a vaginal douche or as an eye wash. According to the advertising matter which is sent out this new, old fake was re-discovered in the Klondike by a miner who in spite of the vast riches which he claimed to have found still thinks of poor suffering humanity and hence is making his discovery available to us. In discussing the liquid sulphur fakes the Journal A. M. A. says: "While we are afraid its disgusting odor will continue to be a strong 'talking point' for the stuff, let us hope that in due course of time the public will learn the fallacy of the old idea that anything that is nasty in taste or odor must be 'powerfully good medicine.'"

### NAMES OF MEDICAL PREPARATIONS.

To Manufacturers of and Dealers in Medicinal Products:

Gentlemen:—The Council on Pharmacy and Chemistry of the American Medical Association, since its organization, has been obliged to refuse recognition to a number of otherwise unobjectionable preparations, because their names were considered detrimental to the best interests of the public and the medical profession. In the hope that in the future those who introduce new remedies may see their way clear to adopt names which will not be open to objection, the Council has decided to issue this explanatory statement to the manufacturers of medicinal substances.

The trade names of pharmaceutical preparations or mixtures should be so framed as to indicate the most potent ingredients. An article whose name gives a false impression in regard to its identity

or origin or which is in other ways misleading would not be acceptable for New and Nonofficial Remedies. An article will not be acceptable if its name suggests to the laity the diseases or conditions in which it is said to be indicated.

After December 31, 1912, recognition will be refused also to names so framed as to indicate even to physicians the diseases or conditions for which the article is to be used. The Council will make no objection to articles submitted to it before December 31, 1912, on the ground that the name is suggestive to the physician, provided that the name is already in use at the time of submission and also provided that the name is so framed as not to be liable, in the judgment of the Council, to lead to self-medication on the part of the public.

Medicine, in common with other branches of knowledge, requires that the subjects with which it deals be provided with a rational, descriptive nomenclature. The Council holds it desirable and important not only that the medicaments official in the pharmacopeias should be provided with scientific names, but that those of a proprietary character should also have names which are descriptive of their composition. Further, the Council believes that the interests of both the manufacturer and the consumer, the physician and his patient, can be sufficiently safeguarded if to the descriptive name of an article there be appended a distinctive word, syllable, initial or sign that shall identify its manufacturer. In substantiation of this it may be stated that such designations have permitted manufacturers to build up almost world-wide reputations for their products. Reference need only be made to chloral hydrate, Schering; chloroform, Squibb; phenacetin, Bayer; quinin sulphate, P. W. R.; sodium salicylate, Merck, etc. In view of these considerations, the Council offers its endorsement and co-operation to any effective movement toward the establishment of a rational, and if possible, international system for the naming of medicaments.

However, the Council recognizes that trade conditions make difficult or infeasible, at this time, the adoption of such a rational system of nomenclature. But, on the other hand, experience has shown it possible to give names to new remedies which at least shall indicate their principal constituents. Thus among the articles described in "New and Nonofficial Remedies" appear such names as arsenoferratin, an organic compound of iron and arsenic; Bornyval, a valeric acid ester of borneol; brovalol, a bornyl bromvalerate; carbosant, a carbonate of sanaton; guaiacodein, a compound of codein and guaiacal; tannismuth, a tannate of bismuth. Therefore the Council recommends that all remedies be given names which shall at least be suggestive of their most characteristic or potent constituents. The Council gives the fullest recognition to the principle that a discoverer has the right to name his discovery and interposes no restriction in the naming of new substances, provided that such names shall not be detrimental to the progress of medicine and thereby work against the welfare and health of the people.

Names which are suggestive of the diseases or conditions in which the remedy is said to be indicated are objectionable because the layman becomes familiar with the names of such remedies and their uses through physicians' prescriptions and is thus led to use them in indiscriminate and harmful self-medication. The many cases of harmful self-medication with such remedies as migrainin, diabetin, purgen, antikamnia, antitussin, which preparations at first were exploited to medical men only, are sufficient to show that such names should be forbidden.

But even if the name of a remedy does not disclose its proposed use to the laity, it is still objectionable if it suggests to the medical man the

diseases or conditions in which the remedy is to be used. This for the reason that the thoughtless physician will base his use of the remedy on the name without giving due consideration to the condition and symptoms of the patient.

Recognizing that some therapeutically suggestive names have been applied without any intention of appealing to the laity thereby, and further recognizing the difficulty of changing a name once established, the Council has decided to make no objection to names that are now in use if they are therapeutically suggestive to physicians only. Such articles, if on the market and submitted prior to December 31, 1912, will be considered acceptable in so far as their names are concerned.

The following rules apply to the names of articles proposed for inclusion with New and Non-official Remedies:

1. The names of pharmaceutical preparations or mixtures must indicate the most potent ingredients.
2. Names which are in any way misleading will not be accepted.
3. Names which suggest diseases, pathologic conditions, or therapeutic conditions will not be admitted, except as provided under 4.
4. An exception is made for established names of synthetic substances, active principles, and other new substances: For these if submitted prior to December 31, 1912, therapeutically suggestive names may be admitted, provided that the name has been in actual use prior to December 31, 1912, and provided further, that the name is not likely to foster self-medication by the laity.

W. A. PUCKNER, Secretary.

#### NEW AND NON-OFFICIAL REMEDIES.

Since February 1 the following articles have been accepted for inclusion with New and Non-official Remedies:

- Sodium Succinate, Exsiccated, Merck & Co.
  - Sodium Succinate, Exsiccated, Fairchild Bros. & Foster.
  - Tablets Oxyntin with Pepsin, Fairchild Bros. & Foster.
  - Capsules Oxyntin with Nux Vomica, Fairchild Bros. & Foster.
  - Cornutol, H. K. Mulford Co.
  - Ampules Cornutol, H. K. Mulford Co.
  - Digitol, H. K. Mulford Co.
  - Atophan, Schering & Glatz.
  - Atophan Tablets, Schering & Glatz.
- The following is a list of the articles whose acceptance has been rescinded during the past year and which therefore are not contained in New and Non-official Remedies, 1912.
- E. G. Binz Co.:
    - Eucaloids.
    - Euca-Mul.
  - Henry C. Blair Co.:
    - Iodone.
    - Iodone Oil.
    - Iodone Ointment.
    - Iodone Surgical Dressing and Dusting Powder.
  - Burroughs Wellcome & Co.:
    - Tabloid Ergotinine Citrate & Strychnine Sulphate.
    - Tabloid Hypophosphites Comp.
  - G. W. Carnrick Co.:
    - Antithermoline.
  - Cloftlin Chemical Co.:
    - Emulsion Cloftlin.
  - Eusoma Pharmacal Co.:
    - Mercuran.
  - Victor Koechl & Co.:
    - Hypnal.
    - Tussol.
  - Merck & Co.:
    - Cupro-Hemol.
    - Ichthermol.
    - Lithium Ichthyol.